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Account Name : RABIDEAU KLEIN
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Phone : (561)655-6221
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FLORIDA LIMITED LIABILITY CO. CARLYLE BEACH HOUSE 103, LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00



COVER LETTER

	New Filling Sec Division of Cor				
SUBJEC	CARLYLE	BEACH HOUSE 103,	LLC		
5,000,000	· • ·	Name of I	Limited Liabil	ity Company	
The encl	osed Articles of	Organization and fee(s)	are submitted	for filing.	
Please re	turn all correspo	ondence concerning this	matter to the i	ollowing:	
	GUY RABI	DEAU			
			Name of	Person	
	RABIDEAL	KLEIN			
			Firm/Co	mpany	
	440 ROYAL	PALM WAY, SUITE	101		
	-, 		Addr	ess	·
	PALM BEA	CH, FL 33480			
	GRABIDEAL	J@RABIDEAUKLEIN	City/State an	d Zip Code	
		E-mail address: (to be us		unnual report notificat	ion)
For further	r information co	ncerning this matter, ple	ase call;		
	GARRETT I		561	655-6221	
	Nam	e of Person		Daytime Telephon	e Number
Enclosed	l is a check for t	he following amount:			
	00 Filing Fee	□\$130.00 Filing Fee Certificate of Status	Certif	5.00 Filing Fee & ed Copy al copy is enclosed)	■\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio P.O. B	ng Address iling Section on of Corporations ox 6327 assee, FL 32314		Street Address New Filing Section D The Centre of Tallahi 2415 N. Monroe Stre Tallahassec, FL 3230	assee ct, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

CARLYLE BEACH HOUSE 103, LLC

(Must conatin the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

2778 S. OCEAN BOULEVARD	2778 S. OCEAN BOULEVARD
#108-N	#108-N
PALM BEACH, FL 33480	PALM BEACH, FL 33480

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

GUY RABIDEAU		
	Name	
440 ROYAL PALM	WAY, SUITE 10	l
Florida street address	(P.O. Box <u>NOT</u>	acceptable)
DALAA DEACH	t:1	12.490

PALM BEACH	FL	33480
City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager SWEET MASTER, LLC 2778 S. OCEAN BOULEVARD, #108-N MGR PALM BEACH, FL 33480 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member,

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

GUY RABIDEAU

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)